

# 2017-2021 Capital Budget Request Form

Jade Brown Russell, Interim Executive Director or Deandra Watson, Chief Accountant

504-636-6400

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Department Agency Number	French Market	Contact Name	Contact E-Mail	Project Name	Project Amount	2017	2018	2019	2020	2021
1	7	72	Annual Allowance for Reauration	\$ 1,075,000.00	\$ 100,000.00	\$ 225,000.00	\$ 250,000.00	\$ 250,000.00	\$ 250,000.00	\$ 250,000.00
2	13	54	Vehicle Replacement Program	\$ 50,000.00	\$ -	\$ 25,000.00	\$ 25,000.00	\$ -	\$ -	\$ -
3	11	63	Painting French Market Buildings	\$ 200,000.00	\$ -	\$ 50,000.00	\$ 50,000.00	\$ 50,000.00	\$ 50,000.00	\$ 50,000.00
4	12	75	Public Restroom Renovations	\$ 100,000.00	\$ -	\$ -	\$ -	\$ 50,000.00	\$ 50,000.00	\$ -
5	10	57	Security/Maintenance Site Furnishing	\$ 125,000.00	\$ 25,000.00	\$ 25,000.00	\$ 25,000.00	\$ 25,000.00	\$ 25,000.00	\$ 25,000.00
6	5	66	Upgrade/Replacement Technology Upgrades	\$ 150,000.00	\$ 50,000.00	\$ -	\$ -	\$ -	\$ 50,000.00	\$ 50,000.00
7	9	51	Major Building Repair/Renovation	\$ 175,000.00	\$ 50,000.00	\$ 25,000.00	\$ 50,000.00	\$ 50,000.00	\$ 25,000.00	\$ 25,000.00
8	2	81	Paving Repairs	\$ 950,000.00	\$ 100,000.00	\$ 250,000.00	\$ 200,000.00	\$ 200,000.00	\$ 200,000.00	\$ 200,000.00
9	8	84	UPB Courtyard Windows/Gutters	\$ 175,000.00	\$ 25,000.00	\$ 50,000.00	\$ 50,000.00	\$ 50,000.00	\$ 25,000.00	\$ 25,000.00
10	1	81	Deferred Building Maintenance	\$ 600,000.00	\$ 400,000.00	\$ 200,000.00	\$ -	\$ -	\$ -	\$ -
11	3	78	HVAC Replacement-UPB RES	\$ 575,000.00	\$ 100,000.00	\$ 125,000.00	\$ 125,000.00	\$ 125,000.00	\$ 125,000.00	\$ 100,000.00
12	4	66	Crescent Park Riparian Barrier Railing	\$ 240,000.00	\$ 80,000.00	\$ 80,000.00	\$ 80,000.00	\$ 80,000.00	\$ -	\$ -
13	6	66		\$ 225,000.00	\$ 225,000.00	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>				\$ 4,640,000.00	\$ 1,155,000.00	\$ 1,055,000.00	\$ 905,000.00	\$ 800,000.00	\$ 725,000.00	\$ -

Department Head  
Signature   
Date 6/2/18

Printed Name **Jade Brown Russell - Interim Executive Director**

### Capital Budget Request Form

Agency Number	892	Department Name	French Market
Project Name	Annual Allowance for Beautification	Department Priority Ranking	7
Project Type	Renovation	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	
Project Address	1008 N. Peters St	Council District	C
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Project to include : Moonwalk site improvements, Bienville Park landscaping and irrigation system installation, Latrobe Park installation		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project Increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (Include Design, Construction, Testing, Contingency, etc.)	\$ 1,075,000.00	Proposed Funding Source	Self generated Funds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	N/A		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	For what year are you requesting the Project? 2017, 2018, 2019, 2020 or 2021? Enter		
	2017	\$	100,000.00
	2018	\$	225,000.00
	2019	\$	250,000.00
	2020	\$	250,000.00
	2021	\$	250,000.00
Is the surrounding infrastructure (i.e. utilities, road network) sufficient to support the intended use of the project?	yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Agency Number	892	Department Name	French Market
Project Name	Annual Allowance for Beautification	Department Priority Ranking	Blank
Categories	Rating	Score	
Public Health and Safety			0
External Requirements			0
Protection of Capital Stock	1		3
Economic Development	3		9
Operating Budget	2		6
Life Expectancy of Project			0
Percent of Population Served by Projects	3		9
Relation to adopted Plans			0
Intensity of Use	3		9
Scheduling	3		9
Benefit/ Cost	1		3
Potential for Duplication	2		6
Availability of Financing	3		9
Special Need			0
Energy Consumption	2		6
Timeliness/ External			0
Public Support	1		3
Environmental Quality and Storm water Management	1		3
<b>TOTAL Ranking</b>			<b>77</b>

### Capital Budget Request Form

Agency Number	892	Department Name	French Market												
Project Name	Vehicle Replacement Program	Department Priority Ranking	13												
Project Type	Equipment	Is a Land acquisition needed? (Y/N)	No												
Will this project be a permanent Immovable Improvement?	No	Does the request meet the General Obligation Bond requirement?													
Project Address	1008 N. Peters St.	Council District	c												
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Vehicles are scheduled for replacement every five years.														
Five Year Summary															
Has an Architect or Engineer prepared drawings for this project?	no	If Yes please explain how this was funded and current status													
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.													
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 50,000.00	Proposed Funding Source	Self generated Funds												
Does this project fall in line with the current Zoning requirements	yes	If no please list required change													
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	N/A														
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.															
What Benefit(s) will be provided to Public from this project?	N/A	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">For what year are you requesting the Project? 2017, 2018, 2019, 2020 or 2021? Enter amount!</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">2017</td> <td></td> </tr> <tr> <td style="text-align: center;">2018</td> <td style="text-align: right;">\$ 25,000.00</td> </tr> <tr> <td style="text-align: center;">2019</td> <td style="text-align: right;">\$ 25,000.00</td> </tr> <tr> <td style="text-align: center;">2020</td> <td></td> </tr> <tr> <td style="text-align: center;">2021</td> <td></td> </tr> </tbody> </table>		For what year are you requesting the Project? 2017, 2018, 2019, 2020 or 2021? Enter amount!		2017		2018	\$ 25,000.00	2019	\$ 25,000.00	2020		2021	
For what year are you requesting the Project? 2017, 2018, 2019, 2020 or 2021? Enter amount!															
2017															
2018	\$ 25,000.00														
2019	\$ 25,000.00														
2020															
2021															
Is the surrounding infrastructure (i.e. utilities, road network) sufficient to support the intended use of the	yes	If no please discuss required improvements and estimated costs													

### Capital Budget Request Priority Rating Form

Agency Number	892	Department Name	French Market
Project Name	Vehicle Replacement Program	Department Priority Ranking	Blank
Categories	Rating		
			Score
Public Health and Safety			0
External Requirements	3		9
Protection of Capital Stock			0
Economic Development			0
Operating Budget	2		6
Life Expectancy of Project			0
Percent of Population Served by Project			0
Relation to adopted Plans			0
Intensity of Use	3		9
Scheduling	3		9
Benefit/ Cost	1		3
Potential for Duplication			0
Availability of Financing	3		9
Special Need			0
Energy Consumption	3		9
Timeliness/ External			0
Public Support			0
Environmental Quality and Storm water Management	1		3
<b>TOTAL Ranking</b>			<b>3</b>

### Capital Budget Request Form

Agency Number	892	Department Name	French Market
Project Name	Painting French Market Buildings	Department Priority Ranking	11
Project Type	Repairs	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	
Project Address	1008 N. Peters St	Council District	C
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Painting of all French Market Buildings		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (Include Design, Construction, Testing, Contingency, etc.)	\$ 200,000.00	Proposed Funding Source	Self Generated Funds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	N/A		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Preserve and provide esthetically pleasing architecture for visitors and residents	For what year are you requesting the Project? 2017, 2018, 2019, 2020 or 2021? Enter amount	
		2017	
		2018	\$ 50,000.00
		2019	\$ 50,000.00
		2020	\$ 50,000.00
	2021	\$ 50,000.00	
Is the surrounding infrastructure (i.e., utilities, road network) sufficient to support the intended use of the	Yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Agency Number	892	Department Name	French Market
Project Name	Painting French Market Buildings	Department Priority Ranking	1
Categories	Rating		
		Score	
Public Health and Safety		0	
External Requirements		0	
Protection of Capital Stock	1	3	
Economic Development		0	
Operating Budget	2	6	
Life Expectancy of Project		0	
Percent of Population Served by Project	3	9	
Relation to adopted Plans		0	
Intensity of Use	3	9	
Scheduling	3	9	
Benefit/ Cost	1	3	
Potential for Duplication	2	6	
Availability of Financing	3	9	
Special Need		0	
Energy Consumption	2	6	
Timeliness/ External		0	
Public Support	1	3	
Environmental Quality and Storm water Management		3	
<b>TOTAL Ranking</b>			

### Capital Budget Request Form

Agency Number	892	Department Name	French Market
Project Name	Public Restroom Renovations	Department Priority Ranking	12
Project Type	Renovation	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	
Project Address	1008 N. Peters St	Council District	c
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Public Restroom Upgrades, Bldg. A, B, D and Washington Artillery Park		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (Include Design, Construction, Testing, Contingency, etc.)	\$ 100,000.00	Proposed Funding Source	Self Generated Funds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	N/A		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Modern and Sanitary facilities for public use	For what year are you requesting the Project? 2017, 2018, 2019, 2020 or 2021? Enter amount	
		2017	
		2018	
		2019	\$ 50,000.00
		2020	\$ 50,000.00
2021			
Is the surrounding infrastructure (i.e. utilities, road network) sufficient to support the intended use of the	Yes	If no please discuss required improvements and estimated costs	



### Capital Budget Request Priority Rating Form

<b>Agency Number</b>	892	<b>Department Name</b>	French Market
<b>Project Name</b>	Public Restroom Renovations	<b>Department Priority Ranking</b>	
<b>Categories</b>			
	<b>Rating</b>		<b>Score</b>
Public Health and Safety	2		6
External Requirements	1		3
Protection of Capital Stock	2		6
Economic Development			0
Operating Budget	2		6
Life Expectancy of Project	1		3
Percent of Population Served by Project	3		9
Relation to adopted Plans	1		3
Intensity of Use	3		9
Scheduling	2		6
Benefit/ Cost	1		3
Potential for Duplication	2		6
Availability of Financing	3		9
Special Need			0
Energy Consumption	2		6
Timeliness/ External			0
Public Support			0
Environmental Quality and Storm water Management	1		3
<b>TOTAL Ranking</b>			

### Capital Budget Request Form

Agency Number	892	Department Name	French Market
Project Name	Equipment-Security/Maintenance	Department Priority Ranking	10
Project Type	Equipment	Is a Land acquisition needed? (Y/N)	no
Will this project be a permanent immovable improvement?	no	Does the request meet the General Obligation Bond requirement?	
Project Address	1008 N. Peters St	Council District	C
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Equipment-Security/Maintenance		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	no	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (I.e. require additional staff, maintenance, utilities)	no	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (Include Design, Construction, Testing, Contingency, etc.)	\$ 125,000.00	Proposed Funding Source	Self Generated Funds
Does this project fall in line with the current Zoning requirements	yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	N/A		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	N/A	<small>N/A Note</small>	
		For what year are you requesting the Project? 2017, 2018, 2019, 2020 or 2021? Enter amount	
		2017	\$ 25,000.00
		2018	\$ 25,000.00
		2019	\$ 25,000.00
		2020	\$ 25,000.00
		2021	\$ 25,000.00
Is the surrounding infrastructure (i.e. utilities, road network) sufficient to support the intended use of the	yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Agency Number	892	Department Name	French Market
Project Name	Equipment Security/Maintenance	Department Priority Ranking	1

Categories	Rating	Score
Public Health and Safety	1	3
External Requirements		0
Protection of Capital Stock		0
Economic Development		0
Operating Budget	2	6
Life Expectancy of Project	1	3
Percent of Population Served by Project	3	9
Relation to adopted Plans		0
Intensity of Use	3	9
Scheduling	1	3
Benefit/ Cost	1	3
Potential for Duplication	2	6
Availability of Financing	3	9
Special Need		0
Energy Consumption	2	6
Timeliness/ External		0
Public Support		0
Environmental Quality and Storm water Management	1	3
<b>TOTAL Ranking</b>		<b>3</b>

### Capital Budget Request Form

Agency Number	892	Department Name	French Market
Project Name	Site Furnishing Upgrade/Replacement	Department Priority Ranking	5
Project Type	Upgrade	Is a Land acquisition needed? (Y/N)	no
Will this project be a permanent immovable improvement?	no	Does the request meet the General Obligation Bond requirement?	
Project Address	1008 N. Peters St.	Council District	c
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Periodic Replacement of site furnishings through the French Market District including the Moonwalk		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	no	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	no	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (Include Design, Construction, Testing, Contingency, etc.)	\$ 150,000.00	Proposed Funding Source	Self Generated Funds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	N/A		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Modern fixtures for use throughout the FM district (Benches, tables, waste receptacles)	For what year are you requesting the Project? 2017, 2018, 2019, 2020 or 2021? Enter amount	
		2017	\$ 50,000.00
		2018	
		2019	
		2020	\$ 50,000.00
	2021	\$ 50,000.00	
Is the surrounding infrastructure, i.e. utilities, road network sufficient to support the intended use of the	Yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Agency Number	892	Department Name	French Market
Project Name	Site Furnishing Upgrade/Replacement	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	1	3	
External Requirements		0	
Protection of Capital Stock	1	3	
Economic Development		0	
Operating Budget	2	6	
Life Expectancy of Project		0	
Percent of Population Served by Project	3	9	
Relation to adopted Plans		0	
Intensity of Use	3	9	
Scheduling	3	9	
Benefit/ Cost	1	3	
Potential for Duplication	2	6	
Availability of Financing	3	9	
Special Need		0	
Energy Consumption	2	6	
Timeliness/ External		0	
Public Support	1	3	
Environmental Quality and Storm water Management	1	3	
<b>TOTAL Ranking</b>			<b>3</b>

### Capital Budget Request Form

Agency Number	892	Department Name	French Market
Project Name	Technology Upgrades	Department Priority Ranking	9
Project Type	Equipment	Is a Land acquisition needed? (Y/N)	no
Will this project be a permanent immovable improvement?	no	Does the request meet the General Obligation Bond requirement?	
Project Address	1008 N. Peters St	Council District	C
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Replacement and innovation of technology based equipment and software		
Five Year Summary			
Has an Architect or Engineers prepared drawings for this project?	no	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (I.e. require additional staff, maintenance, utilities)	no	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (Include Design, Construction, Testing, Contingency, etc.)	\$ 175,000.00	Proposed Funding Source	Self Generated Funds
Does this project fall in line with the current Zoning requirements	yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	N/A		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Streamlined business processes to provide excelent customer service to our tenants, vendors, visitors and locals	<small>No. None</small>	
		<b>For what year are you requesting the Project? 2017, 2018, 2019, 2020 or 2021? Enter amount</b>	
		2017	\$ 50,000.00
		2018	\$ 25,000.00
		2019	\$ 50,000.00
2020	\$ 25,000.00		
2021	\$ 25,000.00		

Are the surrounding businesses (i.e. utilities, road network) sufficient to support the intended use of the

yes

If no please discuss required improvements and estimated costs

### Capital Budget Request Priority Rating Form

Agency Number	Blank	Department Name	Blank
Project Name	Technology Upgrades	Department Priority Ranking	
Categories			
Categories	Rating	Score	Score
Public Health and Safety			0
External Requirements			0
Protection of Capital Stock			0
Economic Development			0
Operating Budget	2		6
Life Expectancy of Project			0
Percent of Population Served by Project	2		6
Relation to adopted Plans			0
Intensity of Use	3		9
Scheduling	3		9
Benefit/ Cost	1		3
Potential for Duplication			0
Availability of Financing	3		9
Special Need			0
Energy Consumption	2		6
Timeliness/ External			0
Public Support	1		3
Environmental Quality and Stormwater Management	1		3
<b>TOTAL Ranking</b>			



### Capital Budget Request Form

Agency Number	892	Department Name	French Market
Project Name	Major Building Repair/Renovation	Department Priority Ranking	2
Project Type	Renovation	Is a land acquisition needed? (Y/N)	no
Will this project be a permanent immovable improvement?	yes	Does the request meet the General Obligation Bond requirement?	
Project Address	1008 N. Peters St.	Council District	C
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Major renovations to FMC buildings to include new electrical/mechanical systems, Millwork,		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	no	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	no	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project (include Design, Construction, Testing, Contingency, etc.)	\$ 950,000.00	Proposed Funding Source	Self Generated Funds
Does this project fall in line with the current Zoning requirements	yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	N/A		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts; and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Preserve and provide esthetically pleasing architecture for visitors and residents	<small>No. Rows</small>	
		<b>For what year are you requesting the Project? 2017, 2018, 2019, 2020 or 2021? Enter amount</b>	
		2017	\$ 100,000.00
		2018	\$ 250,000.00
		2019	\$ 200,000.00
		2020	\$ 200,000.00
		2021	\$ 200,000.00
Is the surrounding infrastructure (i.e. utilities; road network) sufficient to support the intended use of the	yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

<b>Agency Number</b>	Blank	<b>Department Name</b>	Blank
<b>Project Name</b>	Major Building Repair/Renovation	<b>Department Priority Ranking</b>	1
Categories	Rating		
		Score	
Public Health and Safety	1		3
External Requirements			0
Protection of Capital Stock	2		6
Economic Development	3		9
Operating Budget	2		6
Life Expectancy of Project	2		6
Percent of Population Served by Project	3		9
Relation to adopted Plans			0
Intensity of Use	3		9
Scheduling	3		9
Benefit/ Cost	1		3
Potential for Duplication	2		6
Availability of Financing	3		9
Special Need			0
Energy Consumption	2		6
Timeliness/ External			0
Public Support			0
Environmental Quality and Storm water Management	1		3
<b>TOTAL Ranking</b>			

### Capital Budget Request Form

Agency Number	892	Department Name	French Market
Project Name	Paving Repairs	Department Priority Ranking	8
Project Type	Renovation	Is a Land acquisition needed? (Y/N)	no
Will this project be a permanent immovable improvement?	yes	Does the request meet the General Obligation Bond requirement?	
Project Address	1008 N. Peters St	Council District	C
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Repair sidewalks, paving and flagstone throughout the French Market District including ADA modifications		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (Include Design, Construction, Testing, Contingency, etc.)	\$ 175,000.00	Proposed Funding Source	Self Generated Funds
Does this project fall in line with the current Zoning requirements	yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	N/A		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Safe passageways for pedestrians visiting the French Market District	<small>For what year are you requesting the project? 2017, 2018, 2019, 2020 or 2021? Enter amount</small>	
		2017	\$ 25,000.00
		2018	\$ 50,000.00
		2019	\$ 50,000.00
		2020	\$ 25,000.00
	2021	\$ 25,000.00	
Is the surrounding infrastructure (i.e. utilities, road network) sufficient to support the intended use of the	yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Agency Number	892	Department Name	French Market
Project Name	Paving Repairs	Department Priority Ranking	1
Categories	Rating		
		Score	
Public Health and Safety	3		9
External Requirements			0
Protection of Capital Stock	3		9
Economic Development			0
Operating Budget	2		6
Life Expectancy of Project	1		3
Percent of Population Served by Project	3		9
Relation to adopted Plans			0
Intensity of Use	3		9
Scheduling	3		9
Benefit/ Cost	1		3
Potential for Duplication	2		6
Availability of Financing	3		9
Special Need	2		6
Energy Consumption	2		6
Timeliness/ External			0
Public Support			0
Environmental Quality and Storm water Management	1		3
<b>TOTAL Ranking</b>			

### Capital Budget Request Form

Agency Number	892	Department Name	French Market
Project Name	UPB Courtyard Windows/Gutters	Department Priority Ranking	1
Project Type	Renovation	Is a Land acquisition needed? (Y/N)	no
Will this project be a permanent immovable improvement?	yes	Does the request meet the General Obligation Bond requirement?	
Project Address	520 St Peter St.	Council District	C
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Restoration of Upper Pontalba courtyard facades and replacement of gutters/windows		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	no	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	no	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 600,000.00	Proposed Funding Source	Self Generated Funds
Does this project fall in line with the current Zoning requirements	yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	N/A		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	yes	For what year are you requesting the Project? 2017, 2018, 2019, 2020 or 2021? Enter amount.	
		2017	\$ 400,000.00
		2018	\$ 200,000.00
		2019	
		2020	
2021			
Is the surrounding infrastructure (i.e. utilities, road network) sufficient to support the intended use of the	Yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

<b>Agency Number</b>	892	<b>Department Name</b>	French Market
<b>Project Name</b>	UPB Courtyard Windows/Gutters	<b>Department Priority Ranking</b>	1

Categories	Rating	Score	
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Public Health and Safety	2	6	
External Requirements		0	
Protection of Capital Stock	3	9	
Economic Development		0	
Operating Budget	2	6	
Life Expectancy of Project	3	9	
Percent of Population Served by Project		0	
Relation to adopted Plans		0	
Intensity of Use	3	9	
Scheduling	3	9	
Benefit/ Cost	1	3	
Potential for Duplication	2	6	
Availability of Financing	3	9	
Special Need		0	
Energy Consumption	2	6	
Timeliness/ External	3	9	
Public Support		0	
Environmental Quality and Storm water Management	1	3	
<b>TOTAL Ranking</b>			



### Capital Budget Request Form

Agency Number	892	Department Name	French Market
Project Name	Deferred Building Maintenance	Department Priority Ranking	3
Project Type	Renovation	Is a land acquisition needed? (Y/N)	no
Will this project be a permanent immovable improvement?	yes	Does the request meet the General Obligation Bond requirement?	
Project Address	520 St Peter/1008 N. Peters St	Council District	C
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Repair buildings and its appearances including Balconies, hallways, millwork, HVAC, etc.		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	no	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	no	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 575,000.00	Proposed Funding Source	Self Generated Funds
Does this project fall in line with the current Zoning requirements	yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:			
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Preservation of some of the most precious historic real estate within the city	<b>For what year are you requesting the Project? 2017, 2018, 2019, 2020 or 2021? Enter amount</b>	
		2017	\$ 100,000.00
		2018	\$ 125,000.00
		2019	\$ 125,000.00
		2020	\$ 125,000.00
2021	\$ 100,000.00		
Is the surrounding infrastructure (i.e. utilities, road network) sufficient to support the intended use of the	yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

Agency Number	892	Department Name	French Market
Project Name	Deferred Building Maintenance	Department Priority Ranking	
Categories			
Categories	Rating	Score	
Public Health and Safety	2	6	
External Requirements		0	
Protection of Capital Stock	2	6	
Economic Development		0	
Operating Budget	2	6	
Life Expectancy of Project	3	9	
Percent of Population Served by Project		0	
Relation to adopted Plans		0	
Intensity of Use	3	9	
Scheduling	3	9	
Benefit/ Cost	1	3	
Potential for Duplication	2	6	
Availability of Financing	3	9	
Special Need		0	
Energy Consumption	2	6	
Timeliness/ External	3	9	
Public Support		0	
Environmental Quality and Storm water Management	1	3	
<b>TOTAL Ranking</b>	<b>17</b>	<b>51</b>	



### Capital Budget Request Form

Agency Number	892	Department Name	French Market
Project Name	HVAC Replacement-UPB RES	Department Priority Ranking	4
Project Type	Equipment	Is a Land acquisition needed? (Y/N)	no
Will this project be a permanent Immovable Improvement?	yes	Does the request meet the General Obligation Bond requirement?	
Project Address	520 St. Peter	Council District	c
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Replace HVAC units in residential apartment units		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	no	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	no	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 240,000.00	Proposed Funding Source	Self Generated Funds
Does this project fall in line with the current Zoning requirements	yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	N/A		
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	N/A	For what year are you requesting the Project? 2017, 2018, 2019, 2020 or 2021? Enter amount	
		2017	\$ 80,000.00
		2018	\$ 80,000.00
		2019	\$ 80,000.00
		2020	\$ 80,000.00
	2021		
Is the surrounding infrastructure (i.e. utilities, road network) sufficient to support the intended use of the	yes	If no please discuss required improvements and estimated costs	

### Capital Budget Request Priority Rating Form

<b>Agency Number</b>	892	<b>Department Name</b>	French Market
<b>Project Name</b>	HVAC Replacement-UPB RES	<b>Department Priority Ranking</b>	

Categories	Rating	Score
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Public Health and Safety	2	6
External Requirements		0
Protection of Capital Stock	2	6
Economic Development		0
Operating Budget	2	6
Life Expectancy of Project	2	6
Percent of Population Served by Project		0
Relation to adopted Plans		0
Intensity of Use	3	9
Scheduling	3	9
Benefit/ Cost	1	3
Potential for Duplication	2	6
Availability of Financing	3	9
Special Need		0
Energy Consumption	2	6
Timeliness/ External		0
Public Support		0
Environmental Quality and Storm water Management	1	3
<b>TOTAL Ranking</b>		

### Capital Budget Request Form

Agency Number	892	Department Name	French Market												
Project Name	Crescent Park Riparian Barrier Railing	Department Priority Ranking	6												
Project Type	Upgrade	Is a Land acquisition needed? (Y/N)	no												
Will this project be a permanent immovable improvement?	yes	Does the request meet the General Obligation Bond requirement?													
Project Address	3230 Chartres St	Council District	c												
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Install protective railing along river to protect public from accessing dangerous river bank (Apx 1000 Linear Feet of Railing)														
Five Year Summary															
Has an Architect or Engineer prepared drawings for this project?	Yes	If Yes please explain how this was funded and current status													
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	no	Please provide estimate of increase or decrease operating costs.													
Estimated Cost of Project: (Include Design, Construction, Testing, Contingency, etc.)	\$ 225,000.00	Proposed Funding Source	Self Generated Funds												
Does this project fall in line with the current Zoning requirements	yes	If no please list required change													
Please discuss how the project conforms to objectives and recommendations of the Master Plan:	N/A														
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.															
What Benefit(s) will be provided to Public from this project?	N/A	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center;">For what year are you requesting the Project? 2017, 2018, 2019, 2020 or 2021? Enter amount</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">2017</td> <td style="text-align: right;">\$ 225,000.00</td> </tr> <tr> <td style="text-align: center;">2018</td> <td></td> </tr> <tr> <td style="text-align: center;">2019</td> <td></td> </tr> <tr> <td style="text-align: center;">2020</td> <td></td> </tr> <tr> <td style="text-align: center;">2021</td> <td></td> </tr> </tbody> </table>		For what year are you requesting the Project? 2017, 2018, 2019, 2020 or 2021? Enter amount		2017	\$ 225,000.00	2018		2019		2020		2021	
For what year are you requesting the Project? 2017, 2018, 2019, 2020 or 2021? Enter amount															
2017	\$ 225,000.00														
2018															
2019															
2020															
2021															
Is the surrounding infrastructure (i.e. utilities, road network) sufficient to support the intended use of the	yes	If no please discuss required improvements and estimated costs													

### Capital Budget Request Priority Rating Form

<b>Agency Number</b>	892	<b>Department Name</b>	French Market
<b>Project Name</b>	Crescent Park Riparian Barrier Railing	<b>Department Priority Ranking</b>	3
<b>Categories</b>	<b>Rating</b>	<b>Score</b>	
Public Health and Safety	3	9	
External Requirements		0	
Protection of Capital Stock	1	3	
Economic Development		0	
Operating Budget	2	6	
Life Expectancy of Project	2	6	
Percent of Population Served by Project		0	
Relation to adopted Plans		0	
Intensity of Use	3	9	
Scheduling	3	9	
Benefit/ Cost	1	3	
Potential for Duplication	2	6	
Availability of Financing	3	9	
Special Need		0	
Energy Consumption	2	6	
Timeliness/ External		0	
Public Support		0	
Environmental Quality and Storm water Management	1	3	
<b>TOTAL Ranking</b>			